

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: SYSTEMS AND METHODS FOR
OVERCOMING STICTION

Attorney Docket Number:: 19930-002800

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 14

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor

1035 South Boulder Road, #115
Louisville
CO
80027

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name::
Family Name:: Miller
Name Suffix::
City of Residence:: Louisville
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 1035 South Boulder Road, #115
City of Mailing Address:: Louisville
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lilac
Middle Name::
Family Name:: Muller
Name Suffix::
City of Residence:: Nederland
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 241 Alpine
City of Mailing Address:: Nederland
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80466

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: L.
Family Name:: Anderson
Name Suffix::
City of Residence:: Boulder
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 1011 Rainbow Way
City of Mailing Address:: Boulder
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80303

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

| | | |
|------------------------------|-------------------------|-----------------------|
| Representative Designation:: | Representative Number:: | Representative Name:: |
| Primary | 28,572 | David N. Slone |
| Associate | 47,629 | Douglas M. Hamilton |

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

[illegible]